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| REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 10/756,779 |
| | Filing Date | 01/14/2004 |
| | First Named Inventor | Ting-Wen Su |
| | Art Unit | 2627 |
| | Examiner Name | GOMA, Tawfik A. |
| | Attorney Docket Number | 973.28.03 |

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|---|----------------------------------|-----------|-------------|
| I hereby revoke all previous powers of attorney given in the above-identified application. | | | |
| <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> <input type="checkbox"/> A Power of Attorney is submitted herewith. OR <input checked="" type="checkbox"/> I hereby appoint the practitioners associated with the Customer Number </div> <div style="width: 35%; border: 1px solid black; text-align: center; padding: 5px;">8685</div> </div> | | | |
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| OR | | | |
| <input type="checkbox"/> Firm or Individual Name | | | |
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| Telephone | | Email | |
| I am the <input type="checkbox"/> Applicant/Inventor. <input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | | |
| SIGNATURE of Applicant or Assignee of Record | | | |
| Signature | | | |
| Name | Guy L. Prolix, Managing Director | | |
| Date | 2 JAN 2008 | Telephone | 2-2718-8558 |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | |
| <input type="checkbox"/> Total of _____ forms are submitted. | | | |

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